

Virginia L. Wallace
Patent Specialist

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE			
						APPLICANT(S)	09/601886			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51			
2	/						52			
3	/						53			
4	21						54			
5	21						55			
6	21						56			
7	18						57			
8	01						58			
9	/						59			
10	/						60			
11	/						61			
12	/						62			
13	41						63			
14	41						64			
15	01						65			
16	1						66			
17	/						67			
18	/						68			
19	31						69			
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43							93			
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45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	3						TOTAL IND.			
TOTAL DEP.	23						TOTAL DEP.			
TOTAL CLAIMS	26						TOTAL CLAIMS			